

FOOD AND DRUG ADMINISTRATION  
Center for Drug Evaluation and Research  
ANTIVIRAL DRUGS ADVISORY COMMITTEE MEETING

**AGENDA**  
January 10, 2001

Holiday Inn – Bethesda, Maryland

NDA 21-227, Candesol<sup>™</sup> (caspofungin acetate) Injection, Merck Research Laboratories, proposed for treatment of invasive aspergillosis in patients refractory to, or intolerant of, other therapies.

8:30 a.m.	Call to Order and Opening Remarks	Roy M. Gulick, M.D., M.P.H. Acting Chair, AVAC
	Introduction of Committee	
	Conflict of Interest Statement	Tara P. Turner, Pharm.D. Executive Secretary, AVAC
8:40 a.m.	FDA Introductory Remarks	Mark Goldberger, M.D., M.P.H. Director, Division of Special Pathogen and Immunologic Drug Products, FDA
8:45 a.m.	<b>Guest Presentation</b> Treatment of Aspergillosis	John R. Perfect, M.D. Duke University Medical Center
9:15 a.m.	<b>Sponsor Presentation</b>	Merck Research Laboratories
	Opening Comments	Jeffrey Chodakewitz, M.D.
	Introduction	Tamra Goodrow, Ph.D.
	Caspofungin Development Program	Carole Sable, M.D.
	Concluding Remarks	Jeffrey Chodakewitz, M.D.
11:15 a.m.	Break	
11:30 a.m.	<b>FDA Presentation</b>	Eileen Navarro, M.D. Medical Officer Division of Special Pathogen and Immunologic Drug Products, FDA
12:30 p.m.	Lunch	
1:30 p.m.	Open Public Hearing	

Paul Hale – Bristol-Myers Squibb, Princeton, New Jersey

2:30 p.m. Charge to the Committee

Mark Goldberger, M.D., M.P.H.  
Director, Division of Special  
Pathogen and Immunologic  
Drug Products, FDA

2:40 p.m. Committee Discussion and Vote

5:30 p.m. Adjourn

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*Questions to the Committee*

1. Do the data presented demonstrate that Cancidas™ is safe and effective for the treatment of invasive aspergillosis in patients who are refractory to, or intolerant of, standard antifungal therapy?
  - a. In your discussion, please comment on the following:
    - i. the amount (e.g., doses and duration) of safety data
    - ii. the restriction on the population (refractory, intolerant)
    - iii. the historical control (Study 028/029)
  - b. If the answer to the above is no, what additional information would you require?
2. The indication discussed today is for patients who are refractory to, or intolerant of standard antifungal therapy. What additional information (preclinical and/or clinical) would be needed to support the indication of initial therapy/first line treatment of invasive aspergillosis?
3. What additional advice does the committee have regarding the design of future studies needed in the development of therapeutic agents for initial therapy, and therapy of patients refractory or intolerant to other antifungal therapies, in patients with pulmonary and/or disseminated aspergillosis?

Potential items for discussion could include:

  - a. the role of animal models
  - b. the impact of whether the agent kills the organism (is “fungicidal”) or inhibits its growth (is “fungistatic”)
  - c. the relative importance of microbiological endpoints compared to clinical endpoints in evaluating the agent’s efficacy in a clinical trial
  - d. choice of control regimen (historical vs. active control)

# **Antiviral Drugs Advisory Committee**

**January 10, 2001 Meeting**

## ***Consultants and Guests***

### ***Consultants (voting)***

William Blackwelder, Ph.D. (Consultant - Center for Biologics Evaluation and Research)  
8613 Hempstead Avenue  
Bethesda, Maryland 20817

Rana A. Hajjeh, M.D.  
Centers for Disease Control  
NCID Division of Bacterial and Mycotic Diseases  
1600 Clifton Road, NE  
Mailstop C09  
Atlanta, Georgia 30333

### ***Guests and Guest Speakers (non-voting)***

John R. Graybill, M.D.  
Chief, Infectious Diseases Service  
Audie Murphy VA Hospital  
7400 Merton Minter Boulevard  
San Antonio, Texas 78284

John R. Perfect, M.D.  
Professor of Medicine  
Division of Infectious Diseases  
Duke University Medical Center  
Room 1558; South Building; Blue Zone  
Durham, North Carolina 27710

Jonathan M. Schapiro, M.D.  
Clinical Assistant Professor  
Department of Medicine  
Stanford University School of Medicine  
Center for AIDS Research  
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David Stevens, M.D.  
Chief of Infectious Diseases  
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